

85697

I.D. number
No. d'identification

Colwell

Surname
Nom de famille

Charles Herbert

Given names
Prénoms

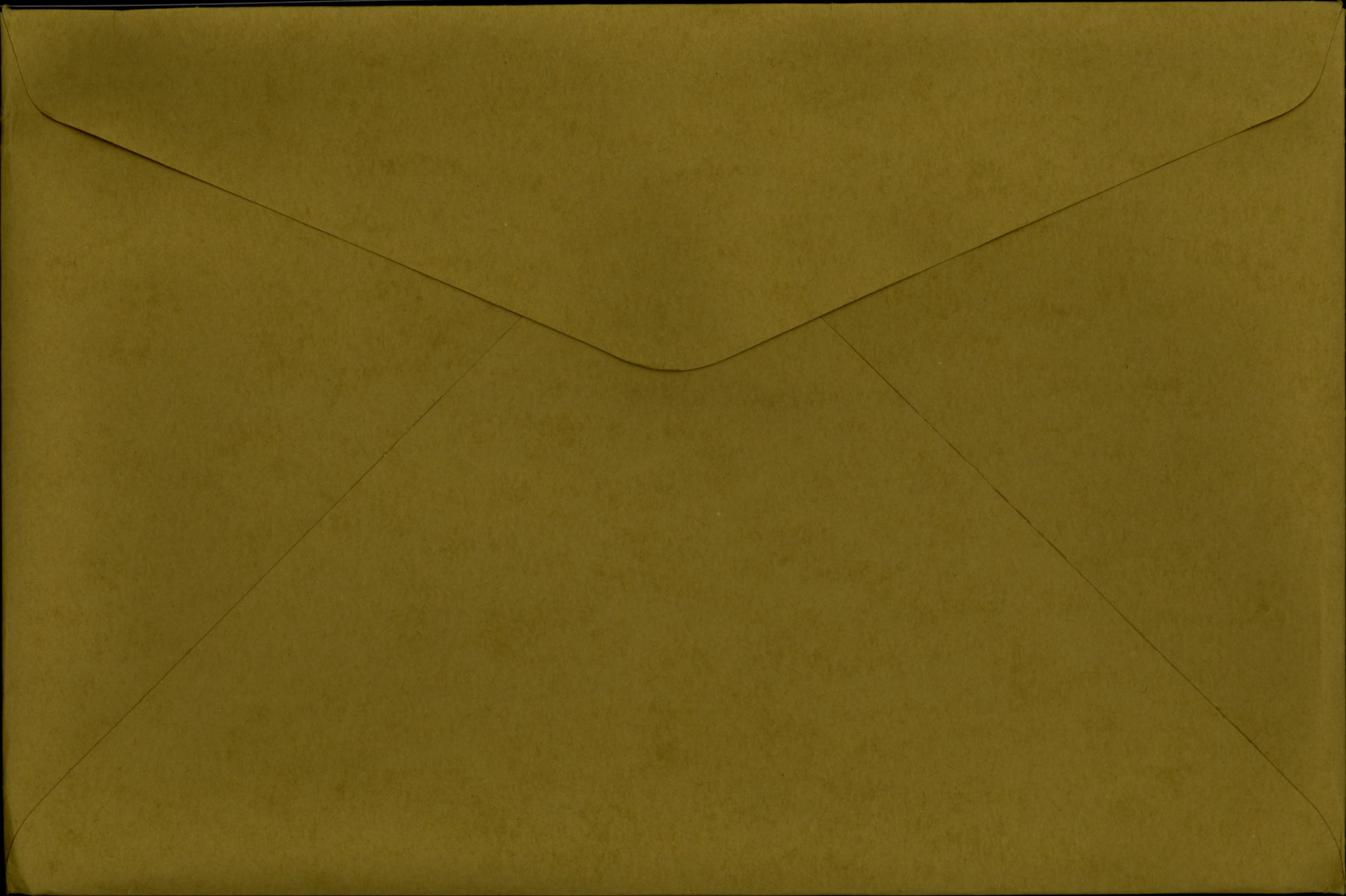
**NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL**

**PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL**

Location
Lieu

Box: 1894

« CONTENTS CONFIDENTIAL »
« CONTENU CONFIDENTIEL »



REGIMENTAL DOCUMENTS

NAME COLWELL CHARLES HERBERT ^{Bde.} REGT. NO. 85697 UNIT 16 Bde. C.A.D. H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

M

Medals 25-9-20 30518

~~*P. 8102*~~

H

Box 18/11

PUBLIC ARCHIVES
RECORDS CENTRE

403817

DEATH

Category

DISCHARGE

Category

Demob.

DESERTION

2/2 - 23
2/16 - 23
3 - 28
2

S

H

UNIT

No 21a
23rd Batty

Regimental No. 85694

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? *Charles Herbert Bolwell*
2. In what Town, Township or Parish, and in what Country were you born? *Fredericton N.B.*
3. What is the name of your next-of-kin? *H. S. Bolwell (father)*
4. What is the address of your next-of-kin? *220 Saunders St. Fredericton N.B.*
5. What is the date of your birth? *Jan. 11, 1890.*
6. What is your Trade or Calling? *Civil Engineer*
7. Are you married? *No.*
8. Are you willing to be vaccinated or re-vaccinated? *Yes*
9. Do you now belong to the Active Militia? *No.*
10. Have you ever served in any Military Force?
If so, state particulars of former Service. *No.*
11. Do you understand the nature and terms of your engagement? *Yes*
12. Are you willing to be attested to serve in the
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? *Yes*

Signed Charles Herbert Bolwell (Signature of Man).
" L. A. Fullerton (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Charles Herbert Bolwell*, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *11 January* 1915. *Signed Charles Herbert Bolwell* (Signature of Recruit).
L. A. Fullerton (Signature of Witness).

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Charles Herbert Bolwell*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *11 January* 1915. *Signed Charles Herbert Bolwell* (Signature of Recruit).
L. A. Fullerton (Signature of Witness).

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at *Fredericton N.B.* this *11* day of *January* 1915.

Sqd. T. M. Seeley J.P. (Signature of Justice).

I certify that the above is a true copy of the Attestation of the above-named Recruit.

Sqd. T. M. Seeley Lt Col (Approving Officer).

Copies

Fredericton N.B.
Lieut. Lt Col
 for Lt Col in records, D. 214.

Description of Charles Herbert Colwell on Enlistment.

Apparent Age 25 years months.
To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.
(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height 5 ft. 9 ins.

Chest measurement, { Girth when fully expanded 37 1/2 ins.
 Range of expansion 3 1/2 ins.

Complexion Fair

Eyes Blue

Hair Lt Brown

Religious denominations. { Church of England
 Presbyterian
 Wesleyan
 Baptist or Congregationalist Yes
 Other Protestants
(Denomination to be stated.)
 Roman Catholic
 Jewish

Two vaccination marks on left upper arm.

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him * fit for the **Canadian Over-Seas Expeditionary Force.**

Date Jan 1 1915

Place Fredericton N.B.

*Signed S. A. Wainwright - Major
 M. D. 1/2 Two for
 Medical Officer.*

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Charles Herbert Colwell having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

Sgt T. M. Seeley Lt Col (Signature of Officer.)

Date 11th January 1915.

CANADIAN EXPEDITIONARY FORCE

WAR SERVICE BADGE

DISCHARGE CERTIFICATE

NUMBER

THIS IS TO CERTIFY that No. 85697 (Rank) Bar.

Name (in full) Charles Herbert Colwell DGM enlisted in the 23rd Battery CFA

CANADIAN EXPEDITIONARY FORCE at Fredericton on the 9th day of January 1915.

HE served in 8th D 48 Batts CFA in France & 16th Bde CFA Russia

and is now discharged from the service by reason of Demobilization. Medical Unfitness.

MEDICALLY UNFIT

on Demobilization

THE DESCRIPTION OF THIS SOLDIER on the Date below is as follows:

Age 29 5/2 years

Height 5ft 9 ins.

Complexion fair

Eyes Blue

Hair Brown

Ch H Colwell

Signature of Soldier.

Marks or Scars

Awarded DGM 11-1-17

Auth B 213 P. Ord 29 d 22-2-17

Date of Discharge



Ramaji Goff Issuing Officer, O. C. DISPERSAL STATION ST. JOHN, N. B. FOR O. C. DISTRICT DEPOT #7

Rank

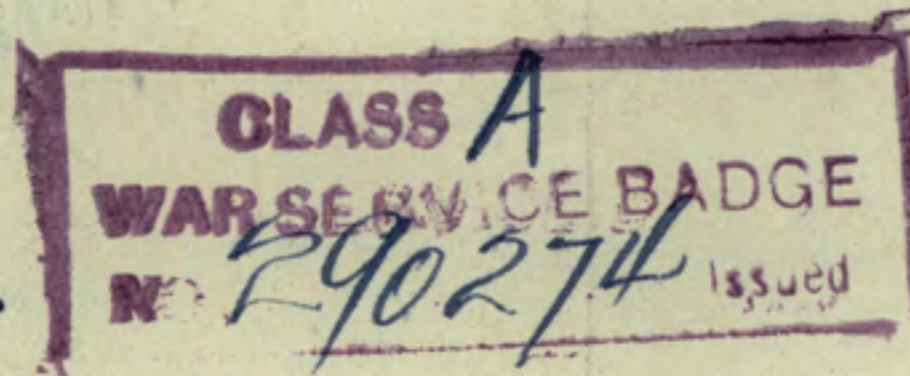
Date JUL 14 1915 19

N.B.- AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY PERSON FINDING SAME IS REQUESTED TO FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL, OTTAWA, CANADA.

1.—That discharge certificate must be carried when wearing uniform.

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.



ORIGINAL

MEDICAL HISTORY SHEET.

Aug 3
85697

918/150

Surname Colwell Christian Name Charles Herbert

Examined on 9 day of January 1915
at Fredoncton NB

Approved by S. F. Wainwright

Birthplace { City or Town Fredoncton
County New Brunswick

Rank Major M.O.

Apparent age 25 yrs.

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,	Officer comd.
<u>1/3/18</u>	<u>A</u>	<u>2nd CCD Melhuys</u>	<u>M.O.</u>
		<u>1 = OCT. 1917</u>	<u>M.O.</u>

Trade or occupation 66

Height 5 Feet 9 Inches.

Weight 150 Lbs.

Chest measurement { Minimum 34 inches.
Maximum expansion 37 1/2 inches.

Physical development fair

Small-Pox Marks none

Vaccination Marks { Arm Right Left
Number 2

Date	Result	VACCINATIONS.	M.O.
<u>6/2/15</u>	<u>good</u>	<u>W. R. Egan, Lieut.</u>	<u>M.O.</u>

When Vaccinated last 1905

(a) Marks indicating congenital peculiarities or previous disease

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.	M.O.
<u>18/1/15</u>	<u>good</u>	<u>W. R. Egan, Lieut.</u>	<u>M.O.</u>
<u>28/1/15</u>	<u>good</u>	<u>" " "</u>	<u>M.O.</u>
<u>TAB 2 13/12/17</u>	<u>good</u>	<u>" " "</u>	<u>M.O.</u>

(b) Slight defects but not sufficient to cause rejection

Enlisted on 11 day of January 1915 at Fredoncton NB

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>23rd Battery 66th</u>	<u>85697</u>	<u>Temperate</u>	<u>11/1/15</u>
Transferred to.. ..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Rehon</u>	<u>2 4 19</u>	<u>Compound Myopia</u> <u>Asymmetrical</u>	<u>Bi permanent</u> <u>J. R. Egan</u>

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

Entries in Red Ink made from Attestation Sheets.

NOV 8 1915

for D. D. M. S.

The Medical History Sheets of all men proceeding overseas must be returned by their commanding officer when they leave England.
 W. R. WARD, Colonel in Charge of Records, Canadian Contingents, London.

CANADIAN

Surname

Christian Name

Richard

Dear Madam.
Taplow, Bucks.
CANADIAN RED CROSS HOSPITAL
DUCHESS OF CONNAUGHT

Canadian Convalescent Hospital,
Hillingdon House, Uxbridge.

4th LONDON
GENERAL HOSPITAL
R. A. M. G. (1)
DENMARK HILL,
SE 5.

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease : how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In general cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of Inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
	Day	Month	Year	Day	Month	Year					
	25	8	17	28	9	17	St. J. of foot.	34	<p>Thin absorption of heels & toes (from boots) followed by infection 3/4 17 to greater tenderness, pain in eyes. None observed till 3 yrs ago. Pupils react to 7.0 A.C. Brown. to case. Mre. Hillingdon Hse. Watlington</p>	<p>Warranted CAPTAIN, R.A.M.G. (1.), Asst. Registrar, 4th London General Hospital</p>	
	19	10	17	25	10	17	Defective vision	14	<p>Best etc. water-solubly Antigenotoxic signs - from changes - in eyes vision & sense to vision R 0.05 - 1.50 Jcs - 50 Fap. 10.5 = 6/6 R 0.25 - 1.50 Jcs - 50 F " 9.5 = 6/6 L 0.25 - 1.50 Jcs - 50 F " 9.5 = 6/6 Exp. grounds normal V: 6. 6. 14. 13 corrected.</p>	<p>Warranted CAPTAIN, R.A.M.G. (1.), Asst. Registrar, 4th London General Hospital</p>	
	25	10	17	30	11	17	L.C.T. Foot	30	<p>Pains in chest & legs. Weak transmission to epaulets R.A.M.G. T.2. Pt. sent up report 6 26. 11. 17 Recovers. Had dental treatment.</p>	<p>Warranted CAPTAIN, R.A.M.G. (1.), Asst. Registrar, 4th London General Hospital</p>	



LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate Militia Form W. 23
or Particulars of Recruit Militia Form W. 133
Field Conduct Sheet..... Militia Form W. 178 or A.F.B. 122
Casualty Form Militia Form W. 54 or A.F.B. 103
Last Pay Certificate..... Militia Form W. 44
Certificate that missing documents are unobtainable.....
Medical History Sheet..... Militia Form B. 313 or A.F.B. 17
Proceedings of Medical Board..... M.F.B. 227, A.F.B. 179 or A.F.A.
Dental History Sheet..... Militia Form B. 465
Medical Report M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet..... Militia Form B. 263
Company Conduct Sheet..... Militia Form B. 263a

Group *2-1*
Checked by No. *22*
W. H. V.
Date *4/9/49*

Canadian Division,
Convalescent Hospital,
Woodcote Park, Epsom, Surrey.

Division... Hut... *113 7*

19 11 1917.

CASES FOR EXAMINATION AND REPORT BY:-

- { OPHTHALMIC SURGEON.
- { AURAL SURGEON.

AT COUNTY OF LONDON WAR HOSPITAL, HORSION, EPSOM

Reg. No. *85697* .. Hand and Name .. *Br Colwell Cpt*

Complains of .. *For eye report please* ..

Mr. C.F.H. Captain.
48 C. A. M. C.

QUESTIONS.

- (1) Does he need Hospital Treatment.
- (2). Will he be fit for Overseas?
 - (a) With glasses.
 - (b) With treatment.
 - (c) Is any prescription given for glasses.

-1.25 -1.5
 $+2.0$ $+2.25$
Op. M. J.

ANSWERS BY { OPHTHALMIC SURGEON.
 { AURAL SURGEON.

- (1) *No*
- (2) *Yes*
 - (a) *Yes*

REMARKS. *please send eye r*
Saturday

21/11 J. Masson-Lapelle
Signature of M.O. examining case.

$R \frac{6-pv}{60} - 1.50 \left\{ \frac{C}{5} \right\} \left. \vphantom{\frac{6-pv}{60}} \right\} \frac{6}{5}$
 $L \frac{6-pv}{60} - 1.50 \left\{ \frac{C}{5} \right\} \left. \vphantom{\frac{6-pv}{60}} \right\} \frac{6}{5}$
W. M. J. R. -0.15
 -0.25
 -0.15

1911

113

1911
The
Report
of the
Committee

113

1911

(1)

113

1911

1911

A.M.D.5/24

EYE, EAR, NOSE AND THROAT CLINIC

Hut 7, Camp 29, RIPON, Yorks.

July 2, 1919

Regt.No 85697 Rank Bdr. Name Colwell, C. H.

Unit Area Pool.

WITHOUT GLASSES

WITH GLASSES (as per prescription below)

		Sph.	Cyd.	Axis.		
Visual acuity R.	<u>6/36</u>	with	-1.50 = -.50 x 105	6/6+		
"	"	L.	<u>6/60</u>	with	-1.50 = -.50 x 90	6/6+

Category recommended is:- B "I". Duration Permanent.

Glasses not ordered

DIAGNOSIS Compound Myopic Astigmatism both eyes.

REMARKS:-

CONDITION WAS PRESENT BEFORE ENLISTMENT AND HAS

NOT BEEN CAUSED BY SERVICE.

HAS NOT BEEN AGGRAVATED BY SERVICE.

R. J. Nicholls

Capt, C.A.M.C.
Eye & Ear Specialist

107 7, Camp St, Bldg, Yorks.

1919

Ref. No. 107 7, Camp St, Bldg, Yorks.

Ref. No. 107 7, Camp St, Bldg, Yorks.

WITHOUT GLASSES
WITH GLASSES (see prescrip below)

Dist.	Sph.	Cyl.	Axis
with	-1.50	-0.50	180
with	-1.50	-0.50	180

Distance recommended is: - 17".

Glasses not ordered

DIAGNOSIS: Myopia and astigmatism both eyes.

REMARKS:-

CONDITION WAS ... BRIGHT BEING ILLUSION AND HAS

NOT BEEN CAUSED BY REFRACTION.

REFRACTION WAS ... BEEN AGGRAVATED BY SERVICE.

W. F. ...
Capt. C.A.M.C.
Eye & Ear Specialist

A.M.D.5/24

EYE, EAR, NOSE AND THROAT CLINIC

Hut 7, Camp 29, RIPON, Yorks.

July 2 1919

Regt.No 85697 Rank Bdr Name Colwell C.H.

Unit A.P.

WITHOUT GLASSES

WITH GLASSES (as per prescription below)

		Sph.	Cyd.	Axis.
Visual acuity R.	<u>6/36</u>	with <u>-1.50</u>	<u>-50</u>	<u>X 105° 06/84</u>
" " L.	<u>6/6</u>	with <u>-1.50</u>	<u>-50 X</u>	<u>90 04/84</u>

Category recommended is:- Bi Duration _____

Glasses not ordered

DIAGNOSIS Compound hyperopic astigmatism
both eyes.

REMARKS:-

CONDITION WAS not PRESENT BEFORE ENLISTMENT AND HAS
not BEEN CAUSED BY SERVICE.
HAS not BEEN AGGRAVATED BY SERVICE.

C.H. Colwell

Capt, C.A.M.C.
Eye & Ear Specialist

WET, WARM, HOSE AND TUBING CLEANING

1910
Hut 7, Camp 22, Milton, Vermont.

Ref. No. _____ Rank _____

Date _____

WITH Hoses (as per
instructions below)

WITHOUT Hoses

Sp. _____ G. _____

Visual control R. _____ with _____

_____ with _____

CONDITION WAS _____

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) C O H W E L L C. H
REGIMENT 16th Bn. C. F. G. RANK Bdr. No. 85697

Date of Examination in England _____ Date of Examination in France _____



PRESENT DENTAL REQUIREMENTS

- 1. FILLINGS 3 - 3 0
- 2. EXTRACTIONS -
- 3. CROWNS -
- 4. DENTURES
 - (a) Full Upper -
 - (b) Part Upper -
 - (c) Full Lower -
 - (d) Part Lower -

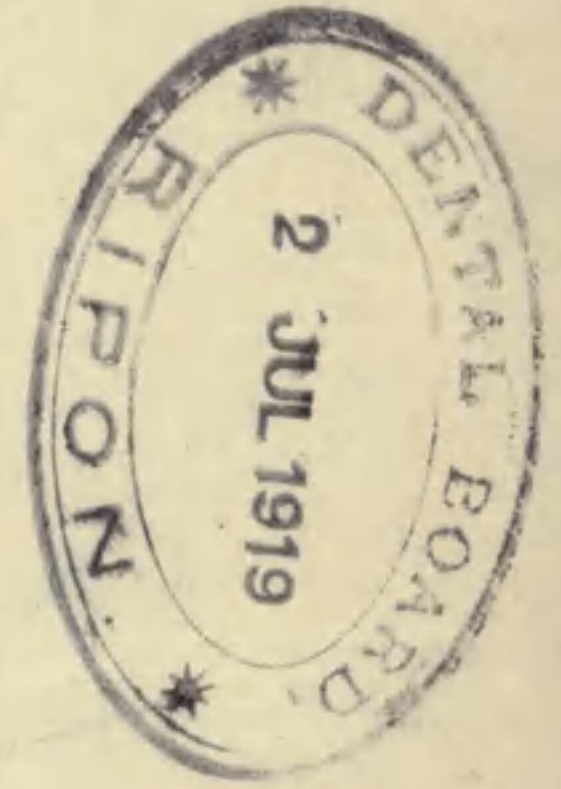
HAS HE EVER REFUSED DENTAL TREATMENT? no

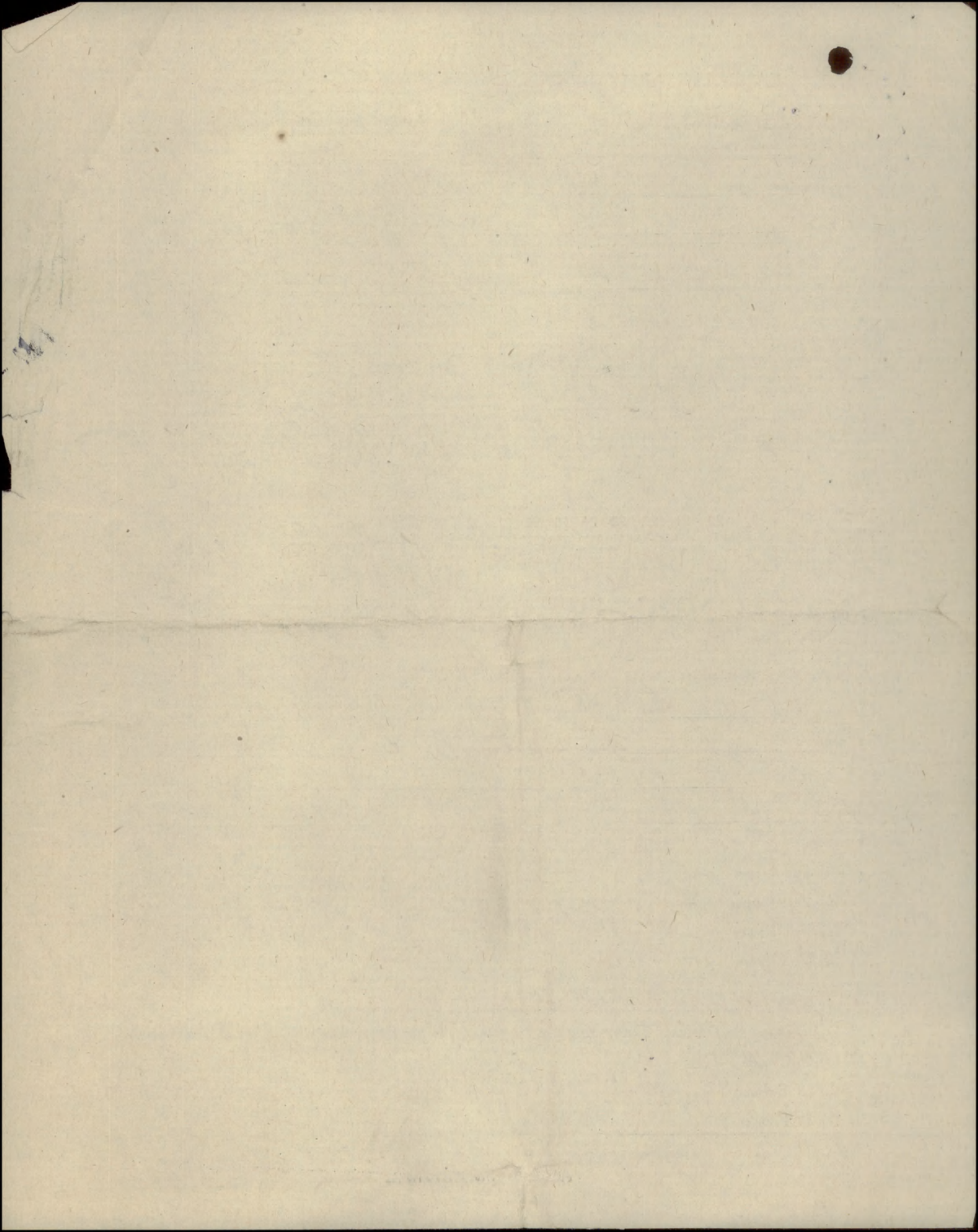
HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)
(a) In Canada -
(b) In England yes
(c) In France -

Signature of Dental Officer _____

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated





W.S.B. Class "A"

bert. RL 2-2-91
R-28 8117

Casualty Form—Active Service.

2nd Batty Regiment or Corps

6th Div
1st Bde
1st Bde
Name *Colwell*
Charles Herbert

Regimental No. *85697* Rank *1st Lt* Name *Colwell*

Enlisted (a) *11/1/15* Terms of Service (a) *Period of war 46 mos* Service reckons from (a) *11-1-15*

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		<i>Transferred to France</i>	<i>Shorncliffe</i>	<i>5/15</i>	<i>K. M. ...</i>
<i>6.6.15</i>	<i>O.C. 2nd Art. Bde</i>	<i>Taken on strength from England as reinforcement</i>	<i>In the Field</i>	<i>5.6.15</i>	<i>B213 pt II 619</i>
<i>23/1/16</i>	<i>"</i>	<i>Proceeded on Leave to</i>	<i>England</i>	<i>23/1/16</i>	<i>B213. P. 2. 6. No. 4. 7/2/16.</i>
<i>6/2/16</i>	<i>"</i>	<i>Returned from</i>	<i>"</i>	<i>1/2/16</i>	<i>" " " 8.14/2/16.</i>
<i>5/3/16</i>	<i>"</i>	<i>Promoted Bombardier</i>	<i>In the field</i>	<i>25/1/16</i>	<i>" " " 12. 14/3/16.</i>
<i>10/4/16</i>	<i>"</i>	<i>To. Div Anti Gas School.</i>	<i>"</i>	<i>14/4/16</i>	<i>" " " 30. 31/7/16.</i>
<i>22.7.16</i>	<i>"</i>	<i>Retd to Unit from Anti Gas School</i>	<i>Field</i>	<i>17.7.16</i>	<i>" " " 30 31.7.16</i>
<i>10.2.17</i>	<i>"</i>	<i>Awarded Good Conduct Badge</i>		<i>11.1.17</i>	<i>B213 P. 11 Ord 29 d 22. 2. 17</i>

RECEIVED CORRECT OFFICE
RECORDED HOUSE
G.P.O.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoehing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
4-8-17.	OC/Unit	Proceeded to 1st Army Rest Camp		31-7-17	B213.P.II.O.125 9/17/17
18/8/17	Unit	Proceeded on leave to England		15/8/17	B213 P II 131 of 27-8-17
18/8/17	of Unit	Returned from 1st Army Rest Camp.	Field.	15/8/17	B213 P II - Ord No 132 of - 28/8/17.
1-9-17.	"	Absent without leave	"	26-8-17	" Det 494 P II Ord 144
16.10.17	officer Records	Admitted to hospital while on leave & posted to CARB Willey		25-8-17	R 22-2-203 RT 16/23845 # 1610 17 P II Ord 162
					<p style="text-align: center;"><i>Geo. B. Stapell</i></p> <p style="text-align: right;">LIEUT. OFFICER in RECORDS CANADIAN SECTION C.M.O. 3RD ECHELON</p>
19.10.17	Reg's Secy	205 from 2 Bde	Willey	25-8-17	P II O. 224 ✓ W.K. Sgt. Lunt For file in Records Com. 7
4-12-17	2ccn	attached to 2ccn	Braunholtz	30-11-17	P II 2 # 250
2.3.18	OC. 2ndCCD	Ceases to be attached to 2nd C. C. D. on return to..... Res. Co.	B's Kost	1.3.18	Pt. 2 D. O. No. 227 for OC. 2nd CCD
5.3.18	Res Bde 62A	205 from 1st Bde	Willey	1-3-18	P II 64 ✓
6-12-17	CARD	On com 2nd C.C.D.	Willey	30-11-17	P II 100. 272 ✓
4-3-18	Do	105 to 1st Bde C.F.A.	Do	1-3-18	P II 100. 63 ✓

J. Bagnall
 CAPT. & ADJT.
 For O.C. CAN. ART. REGIMENTAL DEPOT

Sheet II
 Regiment or Corps Composite Bde CFA
 Rank Bdr Surname Colwell Christian Name Ch. Herbert

Religion Baptist Age on Enlistment 25 years — months.

Enlisted (a) 11-1-15 Terms of Service (a) Duration of War Service reckons from (a) 11-1-15

Date of promotion to present rank _____ Date of appointment to lance rank _____

Extended { _____ } Re-engaged { _____ } Qualification (b) Civil Engineer
 or Corps Trade and Rate _____

Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ... Disembarked ...			
23-5-18	Res Bde CFA	SOS to Composite Bde CRA	Witley	23-5-18 B.O.Pt2.143	<i>At ...</i> Lt. Col. Asst. Aijt. Reserve Brigade, CFA.
23-5-18	Comp. Bde CRA	TOS from Res. Bde. CFA	Witley	23-5-18 B.O.Pt2.1.	
23-8-18	O.C. Camp. Bde. C.F.A.	S.O.S. to 16th Brigade.	Witley	21-8-18. B.O. Pt1193.	
23-8-18	O.C. 16th Bde. C.F.A.	T.O.S. from Comp. Bde. C.F.A.	Witley	21-8-18. B.O. Pt11.1.	<i>W. G. Wright</i> Lieut. for Major. Commanding, Composite Brigade. Canadian Reserve Artillery.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.

[P.T.O.]

CERTIFIED CORRECT
 5 SEP 1918
 MAIN RECORDS, BUNDOCK

W. G. Wright
 Lieut. for Major.
 Commanding, Composite Brigade.
 Canadian Reserve Artillery.
 Witley
 21-8-18. B.O. Pt11.1.
 [Signature]
 LIEUTANT
 FOR THE COLONEL'S RECORDS, C.O.M.E.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
23.9.18	16 th Bde C.D.A.	Proceeded of Base to Northern Russia E.F.	N.M.I "Stephen"	20.9.18	Pt II 28 CAP Lt
16.10.18	"	Arrived at Archangel	Field	1.10.18	Pt II 0.32. CAP Lt
14.4.19	H.Q. N.R.E.F.	Awarded the Distinguished Conduct Medal in recognition of gallant conduct in the field	Field	8.4.19	G.P.O. No. 50. Pt II 015 d 17.4.19
	16 th Bde C.D.A.	Embarked for U.K. per S.M.I. "Garitzka"		11.6.19	Pt II 0
			Chas. P. Smith		
					for Officer i/c Base Records, N.R.E.F.
5/7/19	16 th Bde.	S.O.S. on proceeding to Canada.			
		Walter Couby. Lieut for Adj.			
	Embark RMS-Carmanila Liverpool Capt. & A...				

NAME COLWELL, Charles Herbert,

Regimental No. 85697 Name and address of next-of-kin
 Unit 6th Bgde C F A H. S. Colwell - Father
 Date of enlistment Jan, 11th. 1914 220 Saunders St.
 Place of BIRTH Fredericton, N. B. Fredericton, N. B. Canada
 Married (yes or no) No Date and place discharged
 Amount of pay assigned monthly \$ Reason for discharge
 To whom payable Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
March																
April	31	31	1 ⁰⁰	31 -	31	.10	3 10		34 10			32 50		45	32 95	1 15
April	1	30	1 ⁰⁰	30 -	30	.10	3 -		33 -			32 50		60	33 10	1 05
May	1	31	1 ⁰⁰	30 -	30	.10	3 10		34 10			17 50		50	18 -	17 15
May	16/15	30	6/15	30 .	30	.	3 .		33 .			3 .		3 .	47 15	To 2 nd Bgde
July		31	.	31 .	31	.	3 10		34 10			7		7	74 25	
								2 46							2 46	Ex. Duffie
															76 71	
Aug	31	31	1.00	31 .	31	.10	3 10	2 46	36 56			5 66			5 66	105 15
Sep.	30	30	.	30 .	30	.	3 .		33 .			5 42			5 42	132 73
Oct.	31	31	.	31 .	31	.	3 10		34 10			2 68			2 68	164 15
Nov	30	30	.	30 .	30	.	3 .		33 .			14 07			14 07	183 14
Dec	31	31	.	31 .	31	.	3 10		34 10			16 83			16 83	200 41
Jan	31	31	.	31 .	31	.	3 10		34 10			107 06			107 06	127 45
Feb.	29	29	.	29 .	29	.	2 90		31 90			5 24			5 24	154 11
Mar	31	31	1 ⁰⁵	32 55	31	.	3 10	1 75	35 65			102 55			102 55	88 96
																134 25 7/16 00.12
				398 55			39 70	4 21	442 56			351 95		1 55	353 60	889 6

40 Pleasant St.,
Houlton,
Maine,
u. s. a.
"15/17
C. S. G.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom Mrs. Emma, Colwell,
Address 220, Saunders, St
Frederickton, N.B.

By Whom Assigned Colwell, Chas. A.,
Regtl. No. 85697.
Rank Gr.
Corps 2nd Brigade, C. F. A. 1st Can Dr

~~40 Pleasant St., Houlton, Maine~~
Rate \$15-
Maine 23-2-17
USA
July 1st 1916,
2nd M. 24, 6/16

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



11-51-74

11-51-74

11-51-74

COLWELL

FORM R. 143.
7106-250m-7/2/17.

Name

Charles Herbert ✓
Rank Bdr ✓

Reg. No. 85697 ✓

Unit

~~C. G. Co.~~ 2nd Bde CFA

Next of Kin

Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1911						
25-8	4 th Long. Hqs.		1 CT Sect	B. 68		47
	adm. whilst on leave from home					763
4-10	Can. Con. Hqs. Melville		1 CT Sect	B. 68		3160
	W. 1st Bde W. 1st Bde					
13-10	Duck. of Con. Can. Reg. x. Hqs. Tropic		1 CT Sect	B. 68		3636
26-10	Can. Con. Hqs. Hqs. Beauwood		do	B. 44		11150
2-11	Can. Con. Hqs. Wood Pt			B. 82		11903
30-11	Discharged		do	B. 109		11950

SURNAME.

Colwell, D. C. W.

6'A
CARD NO. ✓
SOS Dis 14-7-19
PO 20/FOL 20-7-19
Permit 7. P. D.

CHRISTIAN NAMES

Charles Herbert

REGL. NO.

85546 . 85697

RANK

Gnr.

UNIT

23rd. Bty. 6th. Bde.

FORMER CORPS

NEXT OF KIN.

NAMES IN FULL

Colwell, H. S.

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

*220 Saunders St. Fredericton.
N.B.*

also notify
CHANGE OF ADDRESS

Mrs. Emma Colwell

40 Pleasant St

Houlton P. 2.

844 P. 23/2/17

COUNTRY OF BIRTH

Canada. Fredericton, N.B.

DATE

PLACE OF ATTESTATION

Fredericton, N.B.

DATE

Jan. 11th 1915.

*op. 23 2-15 49
3,*

R/C 12-7-19 37/18 Bomb

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

DATE

85697

NAME Lowell Charles Herbert
RANK AND CORPS *3rd* *Can Art*

REGT'L NO.
H. Q. FILE NO. 649.

FOLLOWS
No.
FOLLOWS

CABLE	
NO.	DATE
05-9	21-5-19
5/1972	16-5-79

NATURE OF CASUALTY

Re your cable 25-71 officer commanding
NRE 3. reported with unit in good health.

Eng Anna b. Magill
Secretary
Home Service
Boucton, Maine

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
B68	Athol, Den. Denmark Hill	May 25-5-17	(2B) 209 feet
B68 (2)	loan. loan. Hillingdon H. Upbridge	13-10-17	I.C. Feet (loan. Art.)
B68 (2)	4th London Den. Denmark Hill	4-10-17	all above. " " "
B77	loan loan. Bearwood W. H. 15	2-11-17	(2B) 209 feet
B82	Can. loan. Woodcote Park	26-10-17	(2B) 209 feet
B109-3	loan. loan. (back of loan) " " " "	30-11-17	(loan Art.)
	discharged		

No 212 RANK *Sgt.*
#85546 on Feb. Paylist.

NAME *Colewell, Chas. Herbert.*

T. O. S. *11-1-15*
D. O. *#10911-1-15*

UNIT *23rd Battery, 6th Brigade C. I. A.*

M. D. *6.*

PAID FROM	PAID TO	SIG. OR REC'T.	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i> <i>Jan. 11</i>	<i>1915</i> <i>Jan. 31</i>	<i>v</i>		
	<i>Feb.</i>	<i>v</i>		

UNIT SAILED
FEB 23 1915

4

Can: Conval: Hospital,

Bear Wood,

HOSPITAL.

A. & D.
CARD

AT _____

A. & D. No.

0010329

PL. OF ACTION

85697

RANK

Bar.

UNIT

Cy.A.

48th Bty

SICK OR
WOUNDED

NAME

Colwell, G.D.

AGE

27

RELIGION

B

PLACE IN HOSPITAL

3076

DIAGNOSIS

I b to Feet

ADMITTED

25 OCT 1917

FROM

Red + 1st Taploes.

DISCHARGED

TO

TRANSFERRED

1 - NOV 1917

Epsom.

SERVICE AT HOME

1/2

IN FIELD

27
12

RESULTS

REMARKS.

R.R.
Number.....85697.....Rank.....Bdr.....
Surname.....COLWELL.....
Christian Names.....Charles Herbert.....
Unit.....C.F.A.....Theatre of War.....France.....
Dates of Service.....28-5-15.....
Remarks.....
Latest Address.....220 Saunders St.
~~etc Dept of Public Works~~
Fredericton: N.B.

Roll No. B
Page 1783

4 10943 - Dix APR 2 1921

GA 36037 SEP 3 1921

NAME

Colwell, C. H.

(649-C-17592)

RANK

Bdr. 85-697.

UNIT

C. S. A.

AWARD

D. C. M.

AUTH

L. S. # 31456.

16-7-19.



SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

Colwell

C. H.

85697

RANK

UNIT

CO.

TROOP

BATTY.

Bdr.
HOSPITAL

CA. 2 B.

DATE OF ADMISSION

1. *H. Lon. Genl. Denmark Hill St.* HOSP. *25.8.17*

2. *ban. bowal. Nybridge* HOSP. *4.10.17*

3. *N. of C. ban. Red x. Taplow* HOSP. *13.10.17*
ban. conv. Bearwood *26.10.17*

4. *ban. con. Epson* HOSP. *2-11-17*

DIAGNOSIS

I. b. T. feet, etc

1

2

3

DISPOSITION

DATE

19.10.17. B68 adm. while on leave from France.

REMARKS

Dis. 30-11-17

19.10.17. B68 (2)

30.10.17. B74(3)

5.11.17. B. 82(2)

6-12-17 B109(3)

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

MORNING SICK REPORT
MEDICAL INSPECTION REPORT*

Army Form B 256

Unit 65A

Squadron, battery, or company H8 Batt.

Station and date 12 OCT 1917 191

Regtl. No.	Rank and Name (Christian name in full; Surname first; M under name if married.)	Completed Years of		Religion.	If for duty †	Whether a defaulter.	Lines or barracks.	Room.	Disease	Disposal. Medical Officer's remarks and signature
		Age.	Ser-vice.							
85697.	Bdr. Colwell C.H.	27	37 12	Bapt					L.C. Feet H.T. C.F.F.	

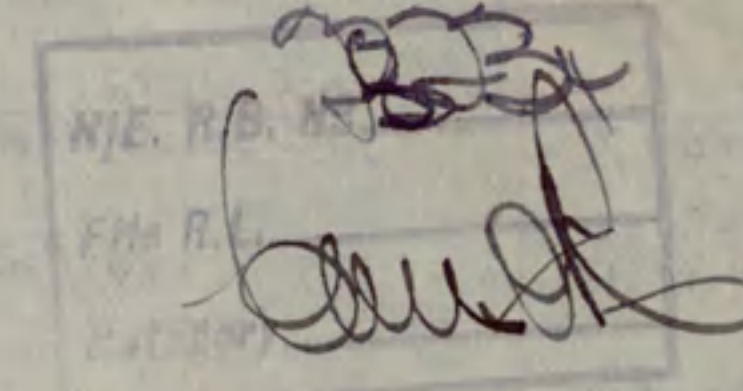
† State nature of duty for which warned. In the case of men for medical inspection, the reason, such as, "Soldiers for trial by Court Martial," or "joining the station," &c., should be stated against their names.
 * Strike out whichever is not applicable.

Orderly
N.C.O.

To be Discharged from Hospital to-morrow.

Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	

Rank and Name COLWELL, Charles Herbert, E-24847
 Regimental No. 85697 Name and Address of Next-of-kin
 Unit 6th. Bde. C.F.A. H. S. Colwell, - Father
 Date of enlistment January 11th. 1915 220 Saunders St.,
 Place of birth Fredericton, N.B. Canada Fredericton, N.B. Canada
 Married (Yes or No) No Date and place of discharge
 If in Permanent Force Reason for discharge
 Character on discharge


 N.E. R. B. M. S.
 F.M. R. L.
 C.A. 1917

Promotions or appointments

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
28-5-15	O.C. Res Bgd	Drafted to France	Shorncliffe	28-5-15	Part II O ^r 64
3-7-15	O.C. 2 nd B.	Taken on from Eng	Rouen	5-7-15	" " #19
7-2-16	...	Proceeded on leave	France	23-1-16	Part II O ^r 7.
14-2-16	...	Returned from leave	"	7-2-16	Part II O ^r 8
14-3-16	...	Promoted to <u>Bnldr</u>	"	25-1-16	Part II O ^r 12.
31-7-16	"	Attached to Div Anti Gas School	"	10/7/16	" " 20
"	"	Returned to duty	"	17/7/16	" " 20
22.7.17	"	Awarded Good Conduct Badge	"	7/4/17	" " 29
23.	"	Absent without leave	Field	26.8.17	" " 144 Canceled O ^r 162 of 22.10.17
18.10.17	"	To 4 Lon Genl Hosp. admitted whilst on leave from France	Denmark Hill	25.8.17	CRB 68 J.C. 7. 2. 2
...	"	Can Gen Hosp. Hillingdon Ho	Leighton	4.10.17	...
...	"	Can bucheop. Comant Red X Hosp	Laplow	13.10.17	...

Report		Record of promotions, reductions, transfers, casualties, etc, during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
22.10.17	2 nd Bde	Posted to Reg ^l Depot adm ^l to Hosp ^l at Leam ^l Camp	B ^{de} Field	25.8.17	P ^l O. 162 Reg ^l Depot 22-4 of 19.10.17
29.10.17	"	To Can. C ^o Hosp ^l Beauwood	Wokingham	26.10.17	CLB. 77 I.C.J. Feet
3.11.17	"	" " " Woodcote P ^l	Exeter	2.11.17	" " 82
6.12.17	"	Dis " " " "	"	30.11.17	" " 109
4.12.17	2 C ^o	of Comd to 2 C ^o	B ^{de} Skott	30.11.17	P ^l O. 250 Reg ^l Depot 272 of 6 th 1917 P ^l O. 637 of 1200-52.D.2.3.18. P ^l O. 637 of 1200-52.D.2.3.18.
4-3-18	City Reg ^l Depot	Posting to Res Bde ex 2 C ^o	B ^{de} Skott	1-3-18	P ^l O. 637 of 1200-52.D.2.3.18.
23.5.18	Comp Bde	T.O.S from Res Bde on Absorb	"	23.5.18	" " 17 Res Bde P ^l O. 143 of 23.5.18 and in P ^l O. 911 of 24.8.18
21.8.18	Comp Bde	S.O.S to 16 th Bde. C.Y.A	B ^{de}	21.8.18	P ^l O. 93 of 16 th Bde P ^l O. 1 of 23.8.18
23.9.18	16 th Bde	Proceeded Aseas to N.R.C.F. at Sea	"	20-9-18	" " 28931 d 12 th 18
16-10-18	"	Disembarked at Archangel Field	"	1-10-18	" " 32
17.4.19	"	awarded Bar to M.M	B ^{de}	8.4.19	" " 15
19.6.19	L ^{td}	Proceeded to England	"	18.6.19	" " 26
6.8.19	16 th Bde	To CANADA 93-E-133	"	5-7-19	" " "
		Guarded Dist. Com. Midal Field	B ^{de}	15.7.19	P ^l O. D.O. (after 10) 27
		S.O.S to CANADA	"	25.7.19	" " "
		OICR F.B.D.O. 1	"	"	" " "

A.F.D. 103 CHECKED
5 SEP 1918

6

S

CLINICAL CHART.
(To be attached to Case Sheet.)

Army Form B. 181.

Corps C. G. A.

No. 85677

Rank and Name Bdr. Colwell C.H.

Military Hospital 15th Can Gen

Age 27

Service 36 1/2

Disease T.C.T. Feet.

Date of admission Oct. 12th / 17

Date of discharge 25 / 10 / 17

Result _____

Dates of Observation	Time																												
	Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		
Days of Disease	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.
Oct 12																													
Temperature, Fahrenheit																													
107°																													
106°																													
105°																													
104°																													
103°																													
102°																													
101°																													
100°																													
99°																													
98°																													
97°																													
Pulse per Minute																													
Respirations per Minute																													
Motions per 24 Hours																													

admitted discontinued

Signature J. R. Kehue

In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps _____

Military Hospital _____

No. _____ Rank and Name _____

Age _____ Service _____

Disease _____ Date of admission _____

Date of discharge _____

Result _____

Dates of Observation																														
	Days of Disease																													
Temperature, Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.
107°																														
106°																														
105°																														
104°																														
103°																														
102°																														
101°																														
100°																														
99°																														
98°																														
97°																														
Pulse per Minute																														
Respirations per Minute																														
Motions per 24 Hours																														

Signature _____ In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 48th Batt 2nd Brig C 7 A.

Military Hospital 4th L. G. H. R. P.

No. 85697

Rank and Name Colwell L/Cpl

Age 27

Service 2 yrs 9 mths

Disease _____

Date of admission 26-8-17

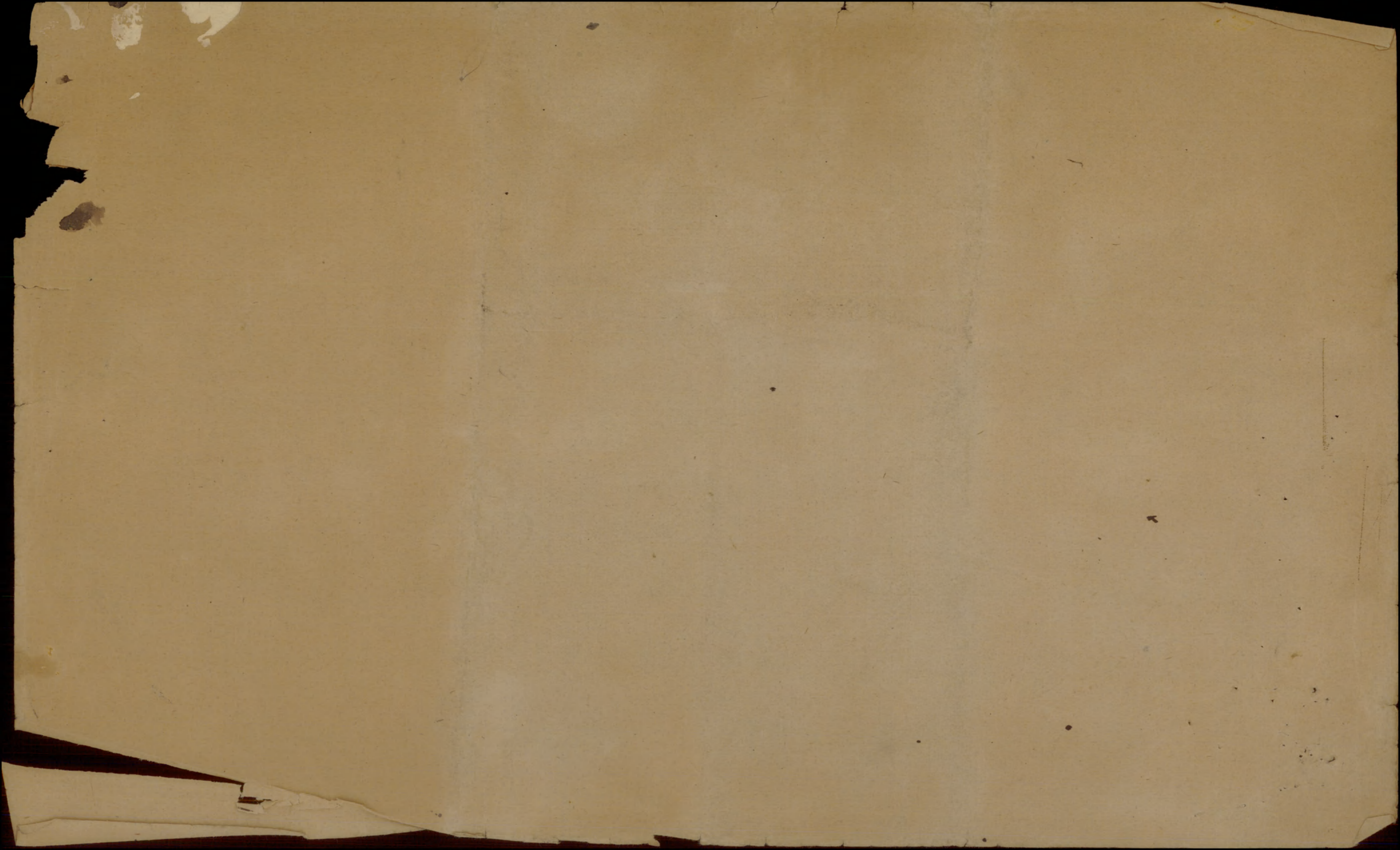
Date of discharge _____

Result _____

Dates of Observation	26					27					28					29					30											
	Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time					
Days of Disease	A.M.		P.M.		A.M.		P.M.		A.M.		P.M.		A.M.		P.M.		A.M.		P.M.		A.M.		P.M.		A.M.		P.M.					
Temperature Fahrenheit																																
Pulse per Minute	12		64																													
Respirations per Minute																																
Motions per 24 hours																																

Signature _____

In charge of case _____



MEDICAL CASE SHEET.*

No. in Admission and Discharge Book <i>452</i>	Regimental No.	Rank.	Surname.	Christian Name.
	<i>85697</i>	<i>Bdr Colwell</i>	<i>Colwell</i>	<i>CIT.</i>
Year	Unit.	Age.	Service.	
<i>1917</i>	<i>C. G. A. 41" Batt</i>	<i>27</i>	<i>3 1/2</i>	

Station and Date.	Disease
<i>Oct 12/17 Taplow</i>	<i>Myopia</i>
	<i>Defective eye - right</i>
	<i>OD 6/60 - 15° D = -50 D x 90° = 6/6</i>
	<i>OD 6/60 - 15° D = -50 D x 90° = 6/6</i>
	<i>Eye grounds normal</i>
	<i>R. OD - 15° D = -50 D x 105° = 6/6</i>
	<i>OA - 15° D = -50 D x 90° = 6/6</i>

	<i>Return to Taplow</i>
<i>25/1/17</i>	<i>To: C. C. H. Bearwood, W. G. Boultin</i>
	<i>capt.</i>

..... Captain,
Med. Off., Canadian Convalescent Hospital,
Bear Wood, Wokingham, Berks.

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

H-2
R10

MEDICAL CASE SHEET.*

London

No. in Admission and Discharge Book. 66 6	Regimental No.	Rank.	Surname.	Christian Name.
	85697	Bdr	Colwell	Charles
Year	Unit.	Age.	Service.	
1917	48 Bty 2 nd Bde C.F.A.	27	2 3/12 7 2 3/12 ^{Bapt}	

Station and Date. 4 L.G.H. 25.8.17

Disease S C T - of foot.

On leave from France

Skin abrasion of heels and toes from boots followed by infection

Aug. 31st 17.

To see Dr. Lindsay Fraser M.F.P.

21.8.17

ep frontal headaches, pain in eyes, worn glasses till 9 yrs ago

RV $\frac{6}{24} \bar{c} - 1.75 = \frac{6}{5}$ LV $\frac{6}{26} \bar{c} - 1.75 = \frac{6}{5}$

Pupils eq. react to light.

+ -1.5 + -1.5

-1 -1

RV $\bar{c} - 1.5 = \frac{6}{5}$ LV $\bar{c} - 1.5 = \frac{6}{5}$

Ord RE ~~act~~ - 1.5 sh ~~o~~

-1.0

-0.5 eye 90

W. Lindsay - Civil Surgeon

Sept. 16th 17

Rec for discharge to command depot.

7/9/17 T. H. Fossey

Canadian Convalescent Hospital, Hillingdon House, Uxbridge.

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

T5089

Canadian No.

Hingham Mass, U.S.A.

3.10.17

Reported sick 2.5-8.17 with
infected blisters on both feet -
were opened & drained - Now
all closed & no open wounds -
Feet ok. No pain or disability.

Complaints of pains in eyes &
headaches, nearly every day -
Eyes blur & burn when reading.
Wore glasses before enlistment
for astigmatism. Got a pair of glasses
at 4th hand down here, but they do not
give satisfaction. -

Treat - Eye report & treatment

Taplow -

Beashever

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
05.10.229	85697	Bomb.	Colwell	John
Year	Unit.	Age.	Service.	
	48th Bty. C.F.C.	27	5 1/2	

Station and Date.	Disease
2076	S. L. T. Feet
	Taplow
	Bear Wood
	Oct 25/17
	no dressings. Feet in good condition. Has not done any walking yet

29 OCT 1917

Dizziness & Pains in chest. Legs weak. Appetite fair. Tonic.

Foot sent to Epsom

R. L. Cavanagh
 Med. Officer
 Bear Wood

Station
and Date.

Fill in only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.

500M.—9-16

H. Q. 1772-39-9/0.

Casualty Form—Active Service.

Unit, Regiment or Corps 23rd Btry

Regimental No. 85697 Rank Bdr. Name Colwell, Charles H.
C. E. F.

Enlisted (a) 9-1-15 Terms of Service (a) DofW Service reckons from (a) 9-1-15

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

Extended Re-engaged Qualification (b) Civil Engineer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
20/7/19	Eng.	TAKEN ON STRENGTH PART II. ORDER No. 201 ST. JOHN, N. B.	District Depot No. 7.	5/7/19	<u>[Signature]</u> Lieut. & Asst. Adj. For O. C. District Depot No. 7.
20/7/19	Asst. Adj.	STRUCK OFF STRENGTH PART II. ORDER No. 201	District Depot No. 7.	14/7/19	<u>[Signature]</u> Lieut. & Asst. Adj. For O. C. District Depot No. 7.
6-8-19	16 th Bde C.F.A.	awarded D. C. M.			<u>[Signature]</u> for D of C AO2. Lg. 21456d15 ⁷ /19.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-6-16.
 1772-39-819.

Sheet No. 2. Mrs. Emma, Colwell,

PAYMENTS.

(mother)

Name of Soldier Colwell, Chas. H.

#85697, Gr. 2nd Brigade, C.F.A.

L. L. Job 4503. - Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
			\$15-	July 1 st 1916,
April	1916			
May				
June				
July				
Aug.		K15046	30	
Sept.		R18011	15	15
Oct.		R22764	15	
Nov.		Q55787	15	
Dec.		S30372	15	
Jan.	1917	S37000	15	
Feb.		R40978	15	
March		U45128	15	15 P. 40 Pleasant St. Houlton
April		M1759	15	15. 40 Pleasant St. Houlton
May	45 L	Q.8844	45	40 Pleasant St., Houlton,
June		M19373	15	maine, U.S.A. 11/5/17 C.S.
July		T21435	15	21434 Canc.
Aug.		X27220	15	
Sept.		W36656	15	
Oct.		N47117	15	
Nov.		Q53172	15	
Dec.		P35820	15	270 ⁰⁰
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

JB

676

Maine, U.S.A.

15 P. 40 Pleasant St. Houlton
~~15. 40 Pleasant St. Houlton~~
 15. 40 Pleasant St. Houlton
 40 Pleasant St., Houlton,
 maine, U.S.A. 11/5/17 C.S.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

8206

July
Aug 1/16

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 85697
 Rank Ser. Promoted Reverted Discharge
 Soldier's Name Chas J. Colwell
 Battalion 2nd Brig. C.F.A. 1st Can Bn.
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

(Mother)
 Name Mrs Emma Colwell
 Address 40 Pleasant St. Houlton Maine
 Change of Address U.S.A.
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917.					3492-c-34
Dec 31			270	270	M.R.O. 2 ^a 21/18
Jan 18	C 67488		15	15	
Feb	D 97039		15	15	
Mar	a 115225		15	15	
Apr	n 8576		15	15	
May	m 13669		15	15	
June	Z 8779		15	15	
July	Z 19847		15	15	
Aug	Z 31931		15	15	
Sept	Z 45171		15	15	
Oct	Z 59719		15	15	
Nov	Z 74239		15	15	
Dec	Z 94458		15	15	
JAN	Z 105078		15	15	
Feb	Z 118823		15	15	
Mar	Z 131254		15	15	
Apr	Z 1584		15	15	
May	Z 10361		15	15	
June	Z 17214		15	15	
JUL	Z 21648		15	15	
			555	555	

AUDITED. 23/14

A/c Closed 31.7.19
 Ret'd per Carmania
 Date 13.7.19 M.F.W. 187 M.D. # 7
 Closed J. Shanahan
 M.R.O. 102200 - 23



M. F. W. 128
 400M. - 6-17 - 1772-38-141
 L. L. 22520 - M. & D. 7933.



SHORT FORM.

WAR SERVICE BADGE.

CLASS A NUMBER

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 85697

2. Rank. Bdr.

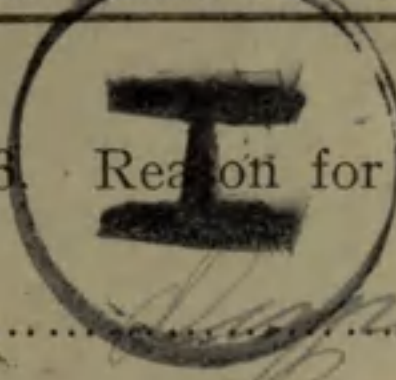
3. Name. Colwell, Charles Herbert M.M.

D.D. No. 7

4. Unit. 16th Bde C.P.C.

5. Date of Discharge JUL 14 1919 Place ST. JOHN, N.B.

6. Reason for Discharge ~~Disability~~ **MEDICALLY UNFIT**



Supersal Area C. on Demobilization

Service Group 19

Occup Religion 6 Cyp

7. Authority. R. O. 1420 (c)

8. Proposed Residence after Discharge ~~Hamilton, N.S.~~ Marmouth

Dept of Public Works & Reconstruction, N.B.

P.D. 14-7-20
log file.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.?

S.S. & W.S.B. Class A

No. 290274

Chas Colwell

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date



Embark R S - 20176
17 9
capt & ...

Signature..... Ramus Capt

(O. C. Discharging Unit.) FOR
DISPERSAL STATION, ST. JOHN, N.B.
O. C. DISTRICT DEPOT #7

Medical Documents Forwarded to S. G. B. or B. P. C. ON
25-7-19

Star 24-11-19

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

YES

19. Is the invalid fit for

- (a) General service, (Category A) (Yes or No.)
- (b) Service abroad, not general service, (" B) (Yes or No.) **Bi-permt.**
- (c) Home service (Canada only), (" C) (Yes or No.)
- (d) Temporarily unfit. (" D) (Yes or No.)
- (e) Unfit for service in Categories A, B and C (" E) (Yes or No.)

20. It is certified that the invalid

(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

- (b) Does not require treatment.
- (c) Should pass under his own control.
- (d) Should not pass under his own control.
(Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

Boarded for return to Canada.
"Authority A.G. Telegram 9083 dated 11-11-18."

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

PLACE Ripon, Yorks. Thos. Lyon, Maj. President.
H.G. McCarthy, Capt. Members
DATE 2.7.1919

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned, understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness _____ Signed _____
Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

PLACE _____ DATE _____ President.

PLACE _____ DATE _____ Members

APPROVED BY Stewart Lewis APPROVED BY _____
Assistant Director of Medical Services. Director-General of Medical Services.

DATE 2.7.1919 DATE _____
RIPON, YORKS.

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

(Russia) STATION Ripon, Yorks. DATE July 2, 1919

1. 1 (a) Unit 67th Battery (b) Regimental No. 85697 (c) Rank Cpl.

(d) Surname COLWELL (e) Christian name Charles Herbert

(f) Home address Holton Maine, U.S.A.

(g) Next of Kin Mrs Emma Colwell (h) Relationship Mother

(i) Address of Next of Kin Holton Maine, U.S.A.

2. Age last birthday Twenty-nine Date of birth Jan. 11, 1890

3. Enlistment, or Appointment (if an Officer) (a) Place Fredericton, N.B. (b) Date Jan. 11, 1915

4. Personal description:

(a) Height 5'-9" (b) Weight est. 145 (c) Complexion Fair
(stripped)

(d) Colour of hair Fair (e) Colour of eyes Blue (f) Identification marks, Scars, etc.

Tattoo mark. Crest. Left forearm

5. Former trade or occupation Draughtsman

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	<u>4</u>	<u>172</u>

	PERIODS	
	From	To
Canada	<u>Jan. 11, 1915</u>	<u>Feb. 27, 1915</u>
England	<u>Mar. 8, 1915</u>	<u>May 28, 1915</u>
France or other theatres of War	<u>May 29, 1915</u>	<u>Aug. 15, 1917</u>
	<u>England. Aug. 16, 1917</u>	<u>Sept. 20, 1918</u>
	<u>Russia. Oct. 15, 1918</u>	<u>June 11, 1919</u>
7. Original disease, or injury	<u>England. June 18, 1919</u>	<u>to date</u>

Compound myopic astigmatism both eyes

(a) Date of origin Pre-war (b) Place of origin Canada

(c) Cause Conditions of civil life

M. F. B. 227.

800M-8-18.
1772-89-117.

M.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

(Compound myopic astigmatism)-Partial loss of function both eyes.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Objective

SVB Specialist Report. July.2.1919.

Visual acuity. Right.6/36. with glasses sph.1.50 Cyl.50x105 - 6/6.

" " Left. 6/36 " " " 1.50 " 50x90 - 6/6.

Category recommended Bi.

Diagnosis:- Compound myopic astigmatism both eyes

Condition was present previous to enlistment and has not been caused by service, has not been aggravated by service.

'Sgd' Capt.R.F.Nicholls. Capt. C.A.M.C.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System.....no..... Cardio-Vascular System.....no..... Genito-Urinary System.....no..... (If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)

Special Senses.....no..... Respiratory System.....no..... Integumentary System.....no.....

Disturbances of Mentality.....no..... Digestive System.....no..... Muscular System.....no.....

Osseous and Joint Systems.....no..... Any other general condition.....no.....

10. (a) History (of the condition referred to in Section 9 (a).)

States eyes were always weak but that they have become more so since enlistment.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

I.C.T. Aug. 1917

(c) (Here give a description of wounds, scar, and deformities.)

Nil

11.—(a) Did the disabling condition have its origin before enlistment? Yes

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

Yes - states was a draughtsman in an office and could do drawing easily - cannot do so now.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? No

The regimental documents will be referred to. (If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? permanent

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

see 9.a.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No.

16. Can the former trade or occupation be resumed? No - does not think his eyes will stand it - frequent headaches on reading.

17. Recommendations.....Bi.....

J.J. Trudel, Capt. C.A.M.C. Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned.....C.H. Colwell.....have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of.....

Bdr. C.H. Colwell Rank. Signature of invalid examined.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature.
16-2-15	Vaccination - W.H. Eagar Lt.
18-1-15	Inoculation - good - W.H. Eagar Lt.
28-1-15	" " "

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

DUPLICATE.

85697

CDLZ

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname COLWELL Christian Name Charles Herbert

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Fredericton, County New Brunswick
 Examined ... { on 9th day of January, 1915 .
 at Fredericton, N.B.
 Declared Age ... 25 years ... days.
 Trade or Occupation ... C.E.
 Height ... 5 feet, 9 inches.
 Weight ... 150 lbs.
 Chest Measurement { Girth when fully Expanded. 37½ inches.
 Range of Expansion 3½ inches.
 Physical Development ... Fair
 Vaccination Marks { Arm ... Right ... Left ...
 Number ... 2
 When Vaccinated ... 1905
 Vision ... { R.E.—V=
 L.E.—V=
 (a) Marks indicating congenital peculiarities or previous disease ... { (a)
 (b) Slight defects but not sufficient to cause rejection ... { (b)

Approved by (Signature) S.F. Wainwright
 (Rank) Major
 Medical Officer.

Enlisted ... { at Fredericton, N.B.
 on 11th day of January, 1915 .

Corps.	Regtl. No.
<u>23rd Battery C.E.F.</u>	<u>85697</u>

Became non-effective by ...
 on ... day of ... This Medical History Sheet has been compared with the corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.
 (Signature) W.R. WARD,
 (Rank) Colonel in Charge of Records,
Canadian Contingents, P.T.O.

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this unit.
 C.A.M.C.
 for the Officer in Charge of Records
 Canadian Contingents.

M.D. No. 7

Royal Bank of Canada Fredericton no. 103
 AUDITOR PAYMASTER

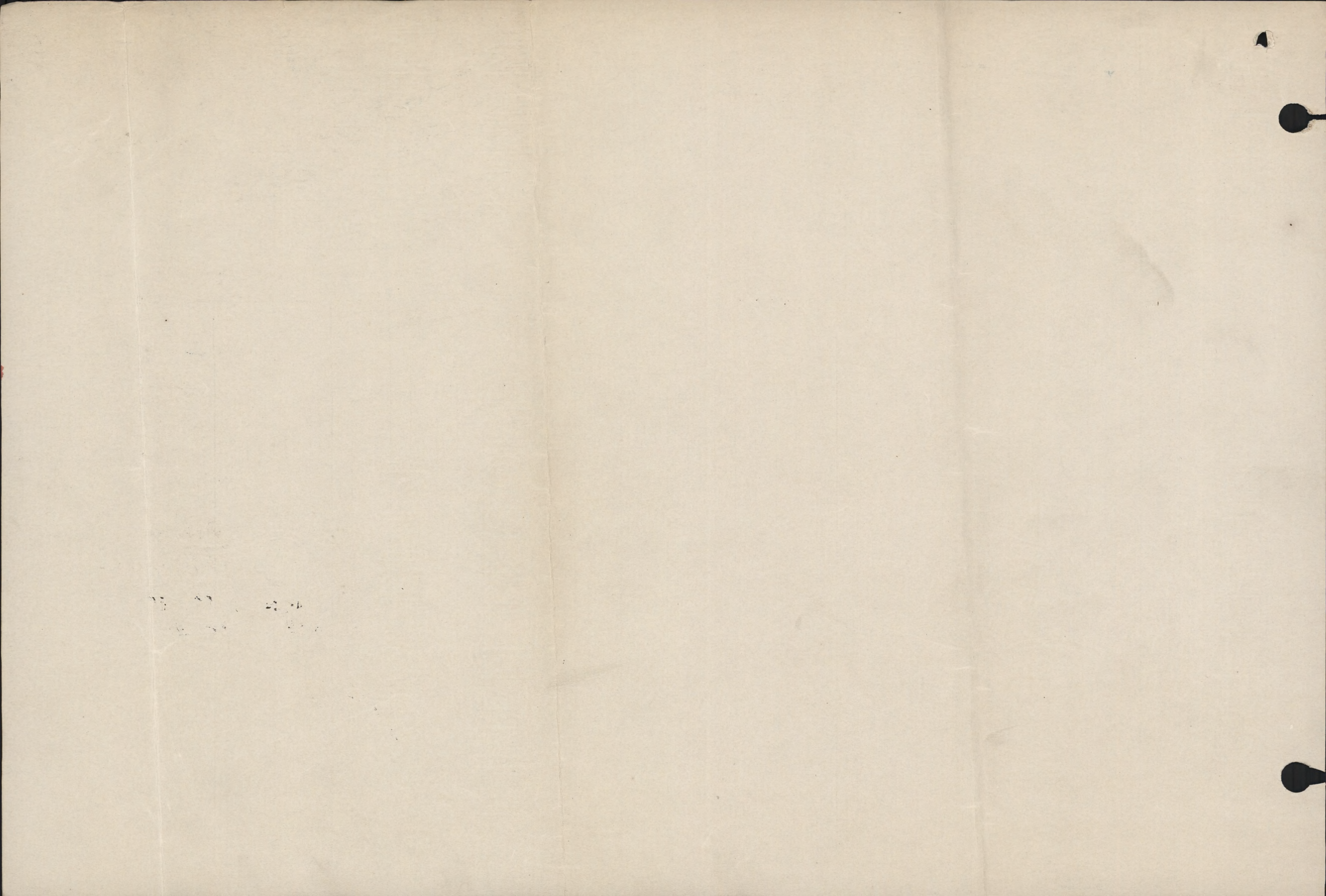
M. OR S. PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 85697 RANK Pdr NAME (IN FULL) Colwell, Chas Herbert
 IF IN P.F. WHAT UNIT? 23rd Battery (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
ADDRESS					PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY \$	DATE EFFECTIVE	2595-
ADDRESS					PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
					ADDRESS		
					STOP PAYMENT FORM RENDERED, DATE	EFFECTIVE	
					DISCHARGED	PLACE DATE REASON	AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT		NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE	DEBIT	CREDIT	
			\$	C.																			
July	15				200	92	200	92															Payroll 13-7-19
July					35	00	70	00															Ex bal long L.P.C. 3-7-19
							105	00	cs	cs	115022	4	87	5	00	296	05						rel Alice 1st P.W.S.
WAR SERVICE GRATUITY.																							
					183 days at min		420	00															Soldier
							420	00															1st P.W.S. as above
																							x O.C.P. & A on disc
																							Chk 1257471 ✓ Apr 11/16
																							Chk 1543419 ✓ 12/8/19
																							Chk 1543419 ✓ 13/9/19
																							Chk 1333120 ✓ 10/14/19
																							Chk 1557994 ✓ 10/14/19
																							Chk 1360323 ✓ 12/21-13/19
																							NON-EFFECTIVE ✓

BALANCE FROM PREVIOUS ACCOUNT



ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME: COLWELL, Chas. H.				
EFFECTIVE DATE:- 1-7-16.		EFFECTIVE DATE:-		NUMBER:- 85697.				
AMOUNT:- 15.00		AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT				
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.		AUTHORITY				
Mrs Emma Colwell. (Mother) 40 Pleasant St. Hawton P.Q.				DATE EFFECTIVE				
				RANK OR APPOINTMENT				
				1.5.16 / Bombadier				
				UNIT AND TRANSFERS				
				ORIGINAL UNIT: 6 th Bde C.F.A.				
				DATE ACCOUNT FIRST OPENED:-				
				AUTHORITY				
				DATE EFFECTIVE				
				DATE LEDGER SHEET T'S P'D				
				UNIT TRANSFERRED TO				
				CRA				
				From Roll 1.8.18 to 8.18 16. Bde C.F.A.				
Awarded M.M. 8-4-19 D.O. 15-16 th Bde-17-4-19								
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS		UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK						
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	
30/5		Tea 68	14.17					
19/6		Ripon	121.67					
2/7		"	24.33					
			158.17					
DAILY RATES OF PAY AND ALLOWANCES								
AUTHORITY		PAY	F.A.	P.F.A.	SUBS'CE ALL'CE			
		1 05	10					

PARTICULARS OF RENDERING NON-EFFECTIVE: Dis Canada 31/7/19 11391 Ripon 2/7 to Ripon 24/27 CR \$200.92

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March	Bde Ford								23 06 123		
April	Bdr's pay	34.50		Ass ^d pay Can				15.-			
				AR. 292. 10.4.18. C.F.A.	973						
				AR. 467. 23.4.18. C.F.A.	973				23 10 123		
		34.50			19.46			15.-			
May	Bdr's pay	35.65		Ass ^d pay Can				15			
				AR. 886. 7.5.18. C.F.A.	973						
				AR. 1261. 23.5.18. C.F.A.	973				24 29 123		
		35.65			19.46			15			
June	Bdr's pay	34.50		Ass ^d pay Can				15			
				AR. 176. 11.6.18. C.F.A.	743						
				AR. 224. 25.6.18. C.F.A.	487				36 49 123		
		34.50			7.30			15			
July	Bdr's pay	35.65		AR 2569 9.7.18 CRA	243						
				AR 2978 23.7.18	487						
				Ass ^d pay Can				15	49 84 123		
		35.65			7.30			15			
Aug	"	35.65		AR 3475 CRA 13/8/18	243				70 49		
				AR 4012 16/8/18	1460				53 46 123		1/2 Adj.
		35.65			17.03			15			
Sept.	Bdr. Pay	34.50		C.F.A.				15	72 96		
				4139 CRA. 4/9/18	268				70 28		
		34.50			2.68			15			
Oct		35.65		a.p.				15	90 93		
		35.65						15			
Nov.		34.50		"				15	110 43		
Dec.		35.65		"				15	131 08		

NUMBER

85697

RANK

3d

NAME

COLWELL

C.H.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Jan	7015						30	13108		
	B Pay	3565		57041791 ady 6/10 16 e 70 ap	253				17855		
								15	14920		
	Feb	16580			253			45			
	met	3220		5 May 27/11/18	507						
		3565		at mel				15			
								15	18198		
		6785			507			30	4013		
	Apr	3450		ap April				15			
	May	3565		cal May				15	74413		
		7015						30			
	ARCT-ALLCE. 1 11 18 TO 30-4-19										
	181 DAYS AT 12 CENTS	21.75		cap June				15			
	Bonus 1.2.19 to 11.6.19			cap July				15			
	@ 12/3 per week £ 11.9.3	5578									
	June Pay	3450		ARS 16328 19/6 12167							
	July Pay	3565							33978		
	Int Off Pay	1931							35909		
		16696						30	23742		
				40	2/7						
				68	30/5						
									70092		
					12167						
					2433						
					1217						
					6650						

Sol 57/9. No 93.